

TRANSPORTATION SERVICES WAIVER AND RELEASE

Please read this form carefully and be aware that in consideration for the Special Recreation Services of Northern Lake County providing transportation services, to the destination/activity described below, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of said services, including but not limited to, vehicle operations and boarding and exiting the vehicle.

Identify Trip (to, from, activity) _____

I recognize and acknowledge that the Special Recreation Services of Northern Lake County nor any of its member agencies (Waukegan Park District, Zion Park District, Lindenhurst Park District, or Round Lake Area Park District) are neither a common carrier nor in the business of providing transportation services to the public. I further recognize and acknowledge that there are certain risks of physical injury to vehicle passengers, and I voluntarily agree to assume the full risk of any injuries, damages or loss, regardless of severity that my minor child/ward or I may sustain as a result of participating in any and all activities connected with or associated with receiving transportation services, including, but not limited to, injuries, damages and loss arising out of negligent operation or supervision of the vehicle. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) against the Special Recreation Services of Northern Lake County or any of its member agencies, including its respective officials, agents, volunteers and employees (hereinafter collectively referred as "Parties").

I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with said transportation services.

I further agree that this agreement shall be governed by the laws of the State of Illinois.

I have read and fully understand the above waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PLEASE PRINT Name of person riding in vehicle _____

Participant's signature _____ Date _____
(18 years or older or Parent/Guardian)

PLEASE PRINT Name of person who signed waiver _____